MOUNDVIEW MEMORIAL EXTENDED CARE 402 WEST LAKE STREET, PO BOX 40

FRIENDSHIP 53934 Phone: (608) 339-333	1	Ownership:	Non-Profit Corporation
Operated from 1/1 To 12/31 Days of Operation	: 365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	Yes	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/05):	18	Title 18 (Medicare) Certified?	No
Total Licensed Bed Capacity (12/31/05):	18	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/05:	18	Average Daily Census:	17
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Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)							
Primary Diagnosis	8	 Age Groups 	*	Less Than 1 Year 1 - 4 Years				
Developmental Disabilities	5.6	Under 65	11.1	More Than 4 Years	33.3			
Mental Illness (Org./Psy)	22.2	65 - 74	5.6	İ				
Mental Illness (Other)	0.0	75 - 84	16.7		100.0			
Alcohol & Other Drug Abuse	0.0	85 - 94	55.6					
Para-, Quadra-, Hemiplegic	5.6	95 & Over	11.1	Full-Time Equivalent				
Cancer	0.0			Nursing Staff per 100 Resid	lents			
Fractures	0.0		100.0	(12/31/05)				
Cardiovascular	0.0	65 & Over	88.9					
Cerebrovascular	22.2			RNs	10.2			
Diabetes	16.7	Gender	%	LPNs	18.4			
Respiratory	5.6			Nursing Assistants,				
Other Medical Conditions	22.2	Male	16.7	Aides, & Orderlies	44.7			
		Female	83.3					
	100.0			İ				
			100.0	İ				

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	!		amily Care			anaged Care	l		
Level of Care	No.	8	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	3	20.0	158	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	16.7
Skilled Care	0	0.0	0	10	66.7	134	0	0.0	0	3	100.0	140	0	0.0	0	0	0.0	0	13	72.2
Intermediate				1	6.7	110	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	5.6
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				1	6.7	202	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	5.6
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende:	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		15	100.0		0	0.0		3	100.0		0	0.0		0	0.0		18	100.0

County: Adams Facility ID: 1010 Page 2
MOUNDVIEW MEMORIAL EXTENDED CARE

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, a	and Activities as of 12	/31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	8	As	sistance of	% Totally	Number of
Private Home/No Home Health	33.3	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	16.7	Bathing	27.8		22.2	50.0	18
Other Nursing Homes	0.0	Dressing	16.7		27.8	55.6	18
Acute Care Hospitals	50.0	Transferring	11.1		22.2	66.7	18
Psych. HospMR/DD Facilities	0.0	Toilet Use	11.1		44.4	44.4	18
Rehabilitation Hospitals	0.0	Eating	77.8		0.0	22.2	18
Other Locations	0.0	********	*****	*****	******	******	******
Total Number of Admissions	6	Continence		%	Special Treatme	ents	%
Percent Discharges To:		Indwelling Or Externa	l Catheter	11.1	Receiving Res	piratory Care	5.6
Private Home/No Home Health	0.0	Occ/Freq. Incontinent	of Bladder	77.8	Receiving Tra	cheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent	of Bowel	50.0	Receiving Suc	tioning	5.6
Other Nursing Homes	0.0				Receiving Ost	omy Care	0.0
Acute Care Hospitals	0.0	Mobility			Receiving Tub	e Feeding	5.6
Psych. HospMR/DD Facilities	0.0	Physically Restrained	l	11.1	Receiving Med	hanically Altered Diet	s 50.0
Rehabilitation Hospitals	0.0						
Other Locations	0.0	Skin Care			Other Resident	Characteristics	
Deaths	100.0	With Pressure Sores		16.7	Have Advance	Directives	72.2
Total Number of Discharges		With Rashes		5.6	Medications		
(Including Deaths)	2				Receiving Psy	rchoactive Drugs	66.7

	This	Other	Hospital-	I	All
	Facility	Based Facilities		Faci	ilties
	8	%	Ratio	8	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.4	90.0	1.05	88.1	1.07
Current Residents from In-County	88.9	84.8	1.05	77.6	1.15
Admissions from In-County, Still Residing	83.3	14.1	5.92	18.1	4.60
Admissions/Average Daily Census	35.3	216.7	0.16	162.3	0.22
Discharges/Average Daily Census	11.8	218.8	0.05	165.1	0.07
Discharges To Private Residence/Average Daily Census	0.0	119.6	0.00	74.8	0.00
Residents Receiving Skilled Care	88.9	97.7	0.91	92.1	0.97
Residents Aged 65 and Older	88.9	89.6	0.99	88.4	1.01
Title 19 (Medicaid) Funded Residents	83.3	66.3	1.26	65.3	1.28
Private Pay Funded Residents	16.7	20.2	0.82	20.2	0.83
Developmentally Disabled Residents	5.6	1.4	4.09	5.0	1.11
Mentally Ill Residents	22.2	32.3	0.69	32.9	0.68
General Medical Service Residents	22.2	23.2	0.96	22.8	0.98
Impaired ADL (Mean)*	60.0	49.3	1.22	49.2	1.22
Psychological Problems	66.7	58.3	1.14	58.5	1.14
Nursing Care Required (Mean)*	11.1	8.0	1.38	7.4	1.50